

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009294

Entity Name: LUNCH'E CORPORATION

FILED  
Aug 22, 2008  
Secretary of State

## Current Principal Place of Business:

852 NE 209 ST  
205  
N.MIAMI, FL 33179

## New Principal Place of Business:

257 BARBOSSA DR  
SEBASTIAN, FL 32958

## Current Mailing Address:

852 NE 209 ST  
205  
N.MIAMI BEACH, FL 33179

## New Mailing Address:

257 BARBOSSA DR  
SEBASTIAN, FL 32958

FEI Number: 20-8664162

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CELTAX & MULTI-HELP  
10875 NW 28 MANORS  
SUNRISE, FL 33322 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GIRALDO, JUAN M  
Address: 852 NE 209 ST # 205  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: VP ( ) Delete  
Name: GIRALDO, LUISA F  
Address: 852 NE 209 ST # 205  
City-St-Zip: N.MIAMI BEACH, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GIRALDO, JUAN M  
Address: 257 BARBOSSA DR.  
City-St-Zip: SEBASTIAN, FL 32958

Title: VP (X) Change ( ) Addition  
Name: GIRALDO, LUISA F  
Address: 257 BARBOSSA DR.  
City-St-Zip: SEBASTIAN, FL 32958

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN MANUEL GIRALDO

P

08/22/2008

Electronic Signature of Signing Officer or Director

Date